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## BIB DATA SHEET

CONFIRMATION NO. 5375

|  |   |  |                                   |   |                           |                                |
|--|---|--|-----------------------------------|---|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/577,609   | <b>FILING or 371(c) DATE</b><br>04/27/2006<br><b>RULE</b>   | <b>CLASS</b><br>250                                      | <b>GROUP ART UNIT</b><br>2881     | <b>ATTORNEY DOCKET NO.</b><br>RR-614 PCT/US   |                           |                                |
| <b>APPLICANTS</b><br>Frank Stengrimsen, Lorenskog, NORWAY;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/NO05/00393 10/19/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>NORWAY 20044434 10/19/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>08/01/2008 |   |  |                                   |   |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/HANWAY CHANG/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>NORWAY | <b>SHEETS DRAWINGS</b><br>10  | <b>TOTAL CLAIMS</b><br>24 | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>RODMAN RODMAN<br>10 STEWART PLACE<br>SUITE 2CE<br>WHITE PLAINS, NY 10603<br>UNITED STATES  |   |  |                                   |   |                           |                                |
| <b>TITLE</b><br>Container for Long-Term Storage of Radioactive Material, and Method and Apparatus for Manufacturing the Container  |   |  |                                   |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>850  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |                                |